

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214507409				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Intercare Insurance Solutions, Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: C T CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: CA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 2/28/2014</p> <p>SCC ID NO: F1781386</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000,000
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COMMON	1,000,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 5375 MIRA SORRENTO PLACE STE 400</p> <p style="text-align: center;">CITY/ST/ZIP: SAN DIEGO, CA 92121</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ROY H TAYLOR TITLE: DIRECTOR ADDRESS: 4371 LATHAM STREET SUITE 101 CITY/ST/ZIP/CO: RIVERSIDE, CA 92501 </td> <td style="width: 50%; vertical-align: top; text-align: right;"> <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: ROY H TAYLOR TITLE: DIRECTOR ADDRESS: 4371 LATHAM STREET SUITE 101 CITY/ST/ZIP/CO: RIVERSIDE, CA 92501	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR		
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH HYDE TREASURER 300 N. LASALLE STREET 17TH FLOOR CHICAGO, IL 60654	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KIRK CHRIST COO 4371 LATHAM STREET SUITE 101 RIVERSIDE, CA 92501	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT GOODREAU SECRETARY 300 N. LASALLE STREET 17TH FLOOR CHICAGO, IL 60654	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JULIE PLAA CFO 4371 LATHAM STREET SUITE 101 RIVERSIDE, CA 92501	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES M VOGDES IV TAX DIRECTOR 300 N. LASALLE STREET 17TH FLOOR CHICAGO, IL 60654	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARTIN P HUGHES DIRECTOR 300 N. LASALLE STREET 17TH FLOOR CHICAGO, IL 60654	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ PHILIP ADLER		PHILIP ADLER, VICE PRESIDENT		2/5/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					